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CONFIRMATION NO. 5916

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/660,083	09/11/2003	604	3763	SHP026.6		
APPLICANTS F. Mark Ferguson, Salt Lake City, UT; David L. Thorne, Kaysville, UT; Donald D. Solomon, North Salt Lake, UT; Daniel K. Smith, Woods Cross, UT; Jeremy W. Snow, North Salt Lake, UT; B. Chance Bagley, American Fork, UT; Craig N. Thome, Syracuse, UT;						
** CONTINUING DATA ***** This application is a CIP of 10/409,819 04/08/2003 PAT 6,796,962 and claims benefit of 60/424,655 11/07/2002						
** FOREIGN APPLICATIONS *****						
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ** 12/04/2003						
Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No /CHRISTOPHER KOHARSKI/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY UT	SHEETS DRAWINGS 55	TOTAL CLAIMS 48	INDEPENDENT CLAIMS 6
ADDRESS SPECIALIZED HEALTH PRODUCTS INC. c/o INTELLEVATE P.O. BOX 52050 MINNEAPOLIS, MN 55402 UNITED STATES						
TITLE Safety shield for medical needles						
FILING FEE RECEIVED 903	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		